Request and Payment for Medical Evidence for Criminal Proceedings Policy (1163/2026)

Abstract

This policy details the correct process to be adopted when requesting and paying for medical evidence.

Policy

1. Introduction

1.1 This policy is required because there are a number of different processes in Force in relation to how requests and payment for medical evidence for criminal proceedings are currently submitted and processed. There is a clear need for one approved process to be endorsed to avoid confusion and duplication and to ensure there is a consistent process across the whole force when requesting medical evidence from practitioners and submitting a claim for payment.

2. Scope

2.1 This policy and supporting procedures detail how medical evidence must be requested and the correct payment process that must be adopted.

3. Policy Statement

3.1 Sussex Police have identified the need to have procedures in place in order to align the process for requesting and paying for medical evidence required for criminal proceedings. It is essential that investigators (police officers and police staff) adopt this immediately as claims submitted outside of this process will be rejected and returned to the person submitting to rectify.

Procedure

1. Requesting Medical Evidence

1.1 There is a clear process that must be adopted when medical evidence is required for criminal proceedings.

1.2 The ‘Authority to Disclose Medical Information’ - form A106B (found in Templates under Admin Forms), is the ONLY form to be used for both requesting medical evidence and processing for payment.

1.3 The A106B must be signed by the patient or their representative / next of kin, or person having parental responsibility prior to sending to the relevant / agreed point of contact from where the evidence is being requested (e.g., a hospital) or direct to the

specific practitioner. The A106B should be accompanied by a MG11 with continuation forms and a self – addressed envelope (SAE) if appropriate.

1.4 The requesting police officer or member of police staff should set out clearly what is needed in the form of a covering letter or email. This is particularly useful if the doctor is different to the one who treated the patient and is therefore using the medical notes as a reference. In this instance a copy of the original notes should be requested and exhibited.

1.5 If the doctor who treated the patient provides the written statement, the medical notes (if provided) will form part of the unused material case file bundle.

1.6 An invoice for services provided should always be requested to support the A106B.

2. Payment for Medical Evidence

2.1 On receipt of the medical statement (and notes if provided), the police officer or member of police staff who sent the medical request **MUST** endorse payment by signing and completing the authorised payment section of form A106B. It should be noted that not all medical practitioners / hospitals request payment for medical notes that accompany a statement. However, if payment is requested, it should be paid.

2.2 The total payment fee should be entered on the A106B where indicated in the authorisation section and should be supported by an invoice.

2.3 Costs in excess of £250 for any standard or historical medical report will require an A60 (found in Templates under Admin Forms) / purchase order and the authority of a Detective Inspector (DI).

Please note that any request for a **specialist report** or evidence, **irrespective of the value,** must follow the A60 process. If over £250 it will require the authority of a DI as above.

Any queries in relation to payment should be directed to Finance Operations in the first instance.

2.4 The correct cost centre code for the requesting Division will be added to the A106B by Finance Operations once they receive the form unless a specific Major Operation Code is provided by the Officer in Charge (OIC).

2.5 The original A106B will remain with the case file whilst a **COPY** and any invoices must be forwarded to Finance Operations within 2 working days of receipt or as soon as is practicable.

Do not hold onto these forms unnecessarily or wait until a larger number have accumulated as this will delay the whole payment process.

2.6 On receipt of these documents, Finance Operations will arrange payment.

2.7 It is accepted that local practices for requesting, and payment of medical statements exist throughout the Force, but it is essential that the correct forms are used and provided

to Finance Operations for auditing purposes. Payment should not be authorised or sanctioned without the correct forms being used.

2.8 Incorrectly completed A106B forms will be returned to the submitting officer or member of police staff to rectify and payment **will not** take place.

2.9 If a hospital and/or Practitioner requests payment ahead of providing the medical statement this can be paid by a Force credit card or Bankers' Automated Clearing System (Bacs). Contact Finance Operations for advice.

3. Authority Levels

3.1 The payment authority levels must be strictly adhered to:

- Up to £250 – Constable or police staff equivalent
- £250 or above - the authority of a DI is required

Team: Specialist Crime Command (Investigations)